B6A (Official Form 6A) (12/07)

| ĬΝ | RE | Aurello, | Mariliza |
|----|----|----------|----------|
| | | | |

| Case No | 10-10587 |
|---------|------------|
| | (If known) |

Debtor(s)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marrial community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DESTOR'S INTEREST IN PROPERTY | HUSBAND, WITE, JOINT, OR CERNALIMITY | CURRENT VALUE OF DESTORS INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|--|---|---|-------------------------|
| Real Property located at 204 Gleela Dr American Canyon CA 84503 | | | 238,000.00 | 516,065.28 |
| Real Property located at 2613 Ball Way Sacamento CA 95421 | | | 124,000.00 | 298,187.63 |
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TOTAL

362,000.00

(Report also on Summary of Schedules)

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| R6B (Official Form 6B) (12/0 | ики | (Official | Form | 6 B) | (12/07) |
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|--------------------------|-----------|----------|---|
| TALITATE Auralia Marilla | | Case No. | 10-10527 |
| IN RE Aurello, Mariliza | Debtor(s) | | (If known) |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "I," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filled, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G · Executory Contracts and Unexpired Leases.

If the property is being held for the debter by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | 20% 6 | description and location of property | HUSBAND, WITE, KINT, OR COMMUNITY | CURRENT VALUE DESTOR'S INTERES PROPERTY WITHO DEDUCTING AN' SECURED CLAIM EXEMPTION |
|-----|---|-------|--------------------------------------|--------------------------------------|---|
| 1. | Cash on hand. | X | | | 50 |
| | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | x | Chase Bank Checking Account | | 54 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Î | | | 804 |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Misc Furniture | | |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact dise, and other collections or collectibles. | X | | | 47 |
| б. | Wearing apparel. | 1 | Clothing | | 1 7 |
| 7. | Furs and jewelry. | X | | | |
| 8. | Firearms and sports, photographic, and other hobby equipment | X | | | |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. | Annuities. Itemize and name each issue. | × | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | 2,77 |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | 401K Account | | 2,11 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |

B6B (Official Form 6B) (12/07) - Cont.

| TN | DF | Aurello. | Meriliza |
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| Case No. | 10-10527 |
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| | (If known) |

Debtor(s)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | TYPE OF PROPERTY | H202 | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOHNE, OR CORRAINTTY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|--|------|--|-------------------------------------|--|
| 5. | Government and corporate bends and other negotiable and non-negotiable instruments. | X | | | |
| 6. | Accounts receivable. | X | | 1 | |
| | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | 2,000.0 |
| 8, | Other liquidated debts owed to debtor including tax refunds. Give particulars. | | 2009 Tax Refund | | 1,000.0 |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 26. | Contingent and noncontingent intercets in estate of a decedent, death benefit plan, life insurance policy, or tost. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | ž | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | • |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | · · · · · · · · · · · · · · · · · · · | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | Ford F150 2005 Lincoln Navigator 2003 | | 13,500.0 |
| 26. | Boats, motors, and accessories. | X | | | |
| | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| | Inventory. | X | | | |
| | Animals. Crops - growing or harvested. Give | X | | | |
| | particulars. | x | | | 1 |
| 33, | Farming equipment and implements. Farm supplies, chemicals, and feed. | x | | | 1 |

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| B6B (Official For | an 6B) (1 | (2/07) | Cont. |
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| 11 | R.C. | MUIT | 1176 | WIGH | |

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Case No. 10 - 10527

Debtor(a)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | (Communication Shoot) | | |
|--|------------------|--------------------------------------|--------------------------------------|--|
| TYPE OF PROPERTY | N O N B | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOHN, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEBUCTING ANY SECURED CLAIM OR EXEMPTION |
| Other personal property of any kind not already listed. Itemize. | х | | | |
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Q continuation sheets attached

(Include amounts from any continuation sheets attached Report total also on Summary of Schedules.)

| B6C (Official Form 6C) (12/07) |
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| IN | RE | Aurello, | Mariliza | A description of the second se | Debtor(s) |
|----|----|----------|----------|--|-----------|
|----|----|----------|----------|--|-----------|

| • | Case No. | 10-10527 ((Chrosen) |
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|---|----------|------------------------|

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor elects the exemptions to | which | debtor is | entitled | under. |
|---------------------------------|-------|-----------|----------|--------|
| coffice who makes because | | | | |

Check if debtor claims a homestead exemption that exceeds \$136,875.

□ 11 U.S.C. § 522(b)(2)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|-------------------------------|--------------------------------------|-------------------------------|---|
| CHEDULE B - PERSONAL PROPERTY | | 50.00 | E0.4 |
| name Bank Checking Account | CCCP § 703.140(b)(5) | 50.D0 | 50.0 |
| lec Furniture | CCCP § 703.140(b)(3) | 800.00 | 800.0 |
| othing | CCCP § 703.140(b)(3) | 475.00 | 476. |
| 1K Account | CCCP § 703.140(b)(10)(E) | 2,774.00 | 2,774. |
| 009 Tax Refund | CCCP § 703.140(b)(5) | 2,000.00 | 2,000. |
| ord F150 2005 | CCCP § 703.140(b)(2) | 1,223.00 | 8,600. |
| ncoin Navigator 2003 | CCCP § 703.140(b)(2) | 1,613.00 | 13,500. |
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B6D (Official Form 6D) (12/07)

| IN RE Aurello, Mariliza Debtor(s) | Case No. | 10-70527 |
|------------------------------------|----------|------------|
| Decicity) | | (if known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any cuttry other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor." include the entity on the appropriate schedule of creditors, and complete Schedule H = Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | | | | _ | | | | |
|--|----------|--------------------------------------|--|------------|--------------|----------|---|------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WITE, JOHN, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTRACENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED FORTION, IF ANY |
| ACCOUNT NO. | | | 1st Mortgage on Real Property located at | t | \vdash | | 516,065.25 | 278,065.25 |
| Aurora Loan Services 10350 Park Meadows Dr Littleton, CO 80524 | | | 204 Glasia Dr Americam Canyon CA 94503 | | | | | , |
| | | | VALUE \$ 238,000.00 | † | | | : | |
| ACCOUNT NO. | | | Real Property located at 2613 Ball Way | † | T | П | 209,999.99 | 174,187.63 |
| Aurora Loan Services 10350 Park Meadows Dr Littleton, CO 80824 | | | Sacramento CA 95421 | | | | · | · |
| | _ L | | VALUE\$ 124,000.00 | 1 | | ll | } | |
| ACCOUNT NO. | | | 2nd Mortgage on Real Property located | T | | П | 88,187.64 | |
| Ocwen Loan Services PO Box 785063 Orlando, FL 32878 | | | at 2613 Ball Way Sacramento CA 95421 | | | | · | |
| | | | VALUE\$ 124,000.00 | 1 | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | | | | | |
| O continuation sheets attached | | | (Total of th | - | |) | s 814,252.88 | \$ 452,252.88 |
| | | | (Use only on is | | |) | s 814,252.88 | |
| | | | | | | | | olso on Statistical |

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Schedules)

Summary of Certain Liebilities and Related

| 10417 | (Official | Earw. | AT' | (12/07) |
|-------|-------------|-------|-----|---------|
| ROF | (C) zzrcret | FOLD | QC) | (1207) |

| IN RE Aurello, Marilles | Debror(s) | Case No. | /0 - /0 5 27 (If known) |
|-------------------------|-----------|----------|----------------------------|
| | Deuga(3) | | (4 3410/122) |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filling of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Dee, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "I," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule 5 in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Date.

| Sta | tistical Summary of Certain Liabilities and Related Date. |
|--|---|
| list | Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority and on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
| | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TY | PES OF PRIORITY CLAIMS (Check the appropriate box(cs) below if claims in that category are listed on the attached sheets) |
| -1-1-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3 | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| 9 1993-3819 EZ+ang. mc | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen. Claims of certain farmers and fishermen, up to \$5,400* per farmer or fishermen, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property of services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | O continuation sheets attached |

Case: 10-10527 Doc# 8-1 Filed: 03/11/10 Entered: 03/11/10 21:44:31 Page 7 of

B6F (Official Form 6F) (12/07)

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| IN RE Aurello, Mariliza | Case No. 10-10-527 |
|-------------------------|--------------------|
| Debtor(s) | (If known) |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the martial community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND A COOUNT NUMBER (See Instructions Above.) | CODEBTOR | HUSHAND, WITE, JOINT, OR COMMENTY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOPP, SO STATE | CONTINGENT | UNITOUTDATED | DASPUTED | Amount OP CLAIM |
|--|----------|--------------------------------------|--|------------|--------------|----------|-----------------------|
| ACCOUNT NO. | | | Unaecured Loan | _ | | | - |
| Aurora Ln Svcs LLC 327 Inverness Dr S Englewood, CA 80112 | | | Real Property located at 2613 Ball Way Sacarmento CA 95821 Foreclosed | | | | |
| ACCOUNT NO. 548604200094 | | Н | Open account opened 9/0\$ | \vdash | | - | 300,000.00 |
| Chase Benk One Card Serv Westerville, OH 43081 | | | | | | | |
| ACCOUNT NO. 541822743452 | | Н | Revolving account opened 10/07 | H | | + | 13,372.00 |
| Chase Bank One Card Serv Westerville, OH 43081 | | | | | | | # GOT OD |
| ACCOUNT NO. 549123729742 | + | Н | Revolving account opened 9/07 | H | \dashv | \dashv | 6,965.00 |
| Usaa Savinge Bank Po Box 47504 San Antonio, TX 78265 | | | | | | | |
| | | | | \prod | | | 11,932.00 |
| O continuation sheets attached | | | (Total of t | Subi | | | 332,269.00 |
| | | | (Use only on last page of the completed Schedule F. Report the Summary of Schedules and, if applicable, on the Summary of Certain Liabilities and Relate | teds: | tica | 1 | 332,269.00 |

Case: 10-10527 Doc# 8-1 Filed: 03/11/10 Entered: 03/11/10 21:44:31 Page 8 of

B6G (Official Form 6G) (12/07)

| IN RE Aurello, Mariliza | Case No. 10 - 18507 |
|-------------------------|---------------------|
| Dobtor(s) | (If known) |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property, include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchasor," "Agent," etc. State whether debtor is the lesses or lease of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if debtor has no executory contracts or unexpired leases.

| NAME O | AND MAILING ADDRESS, INCLUDING ZIP CODE FOTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DESTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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B6H (Official Form 6H) (12/07)

| IN RE Aurello, Mariliza Debtor(s) | Case No. 10 - 10507 (If known) |
|------------------------------------|--------------------------------|
|------------------------------------|--------------------------------|

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guaranters and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louislana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. Sec, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|--|------------------------------|
| urello, Martin 04 Gisela Dr merican Canyon, CA 94503 | (nondebtar spause) |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

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B6I (Official Form 6I) (12/07)

| TNI | DE | Amella | Rapplian |
|-----|------|----------|----------|
| 11 | R.E. | MUI OIIU | Mariliza |

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Debtor(s)

Report 260 on Summary of Schedules and, if applicable, on Statistical Summary of Cortain Liabilities and Related Data)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint partition is filed unless the

| Debtor's Marital Status | 1 | DEPENI | DEPENDENTS OF DEBTOR AND SPOUSE | | | | | | | |
|--|------------------|---|--|---------------|---------------------------------------|--|---------|--|--|--|
| Married | | RELATIONSHIP(S): Daughter Daughter Daughter | | | | AGE(S): 16 13 6 | | | | |
| EMPLOYMENT: | | DEETOR | | | SPOUSE | | | | | |
| How long employed 8 years | | tant Occ Therapist Christian School John Muir Heal Callaghan Lane | | | | | | | | |
| INCOME: (Estima | ate of average o | or projected monthly income at time case | e filed) | | DEBTOR | 6. | POUSE | | | |
| Current monthly Estimated month | gross wages, se | alary, and commissions (prorate if not p | aid monthly) | \$ \$ | | | ,300.00 | | | |
| 3. SUBTOTAL | | | | \$ | 500,00 | 6 | ,300.00 | | | |
| 4. LESS PAYROLI | | | | | · · · · · · · · · · · · · · · · · · · | 100 | | | | |
| a. Payroll taxes asb. Insurance | na Social Secui | nty | | | 32,10 S | | | | | |
| c. Union dues | | | | 4. | \$ | | | | | |
| | ł | | | .a <u>.</u> € | 5 | And the contract of the latest | | | | |
| (), | | | | - | \$ | | | | | |
| 5. SUBTOTAL OF | PAYROLL I | DEDUCTIONS | , | | 32.10 \$ | 1. | ,700.00 | | | |
| 6. TOTAL NET M | ONTHLY TA | KE HOME PAY | | \$ | | 4. | | | | |
| 7. Regular income t | rom operation | of business or profession or farm (attack | b detailed statement) | ¢ | ¢ | | | | | |
| 8. Income from real | property | and a serious of broadlast of facility (million | i demied statement) | | \$ | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| 9. Interest and divid | lends | | | \$ | | * | | | | |
| Alimony, maint | enance or supp | ort payments payable to the debtor for the | he debtor's use or | | | | | | | |
| hat of dependents I | isted above | | | \$ | \$ | | | | | |
| 11. Social Security | or other govern | iment assistance | | _ | | | | | | |
| (Specify) | | | W. INT. BUILDING BY A.V.A | | | | | | | |
| 2. Pension or retire | ment income | | | \$ | | , | | | | |
| 3 Other monthly i | ncome | | | | \$ | | | | | |
| (46.44.37) | / | | Appella (Maghillag), ya umua saa saa saa saa saa sagaa ya aa a | \$ \$ | \$ | | | | | |
| | | | | \$ | | | | | | |
| 4. SUBTOTAL O | F Lines 7 Te | IROUGH 13 | | \$ | \$ | | | | | |
| 5. AVERAGE MO | ONTHLY INC | COME (Add amounts shown on lines 6 a | and 14) | \$ | 467.90 \$ | | 600.00 | | | |
| 6. COMBINED A | VERAGE MO | ONTHLY INCOME: (Combine column | n totals from line 15. | | | | | | | |
| f there is only one of | lebtor repeat to | stal reported on line 15) | · · · · · · · · · · · · · · · · · · · | | \$5 | 087.90 | | | | |

17. Describe any increase or decrease in Income reasonably anticipated to occur within the year following the filing of this document: None

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B6J (Official Form 6J) (12/07)

| | IN RE Aurello, Mariliza | ase No. 10 - 10527 | |
|----------------------------------|--|--|-------------------|
| | Debtor(s) | (If known) | |
| | SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDU | AL DEBTOR(S) | |
| | Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at tiquarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form ma on Form22A or 22C. | ime case filed. Prorete any payments made b | iweekly Bilowe |
| | Check this box if a joint petition is filed and debtor's spouse maintains a separate house expenditures labeled "Spouse." | rehold. Complete a separate sched | dule o |
| | 1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? Yes, No | \$3,9 | 200.00 |
| | b. Is property insurance included? Yes No 🖌 | | |
| | a, Electricity and heating fuel | \$ | 160.00 |
| | b. Water and sewer | \$ | 80.00 |
| | c. Telephone d. Other | \$ 000 mm and an and an an and an an an an and an an an an an and an | <u> </u> |
| | | | |
| | 3. Home maintenance (repairs and upkeep) | \$ | |
| | 4. Food 5. Clothing | \$4 | |
| | 6. Laundry and dry cleaning | \$ \$ | |
| | 7. Medical and dental expenses | . = | |
| ξ | 8. Transportation (not including car payments) | \$ \$ | 200.00 |
| | 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | |
| - Forms Soffwa | 10. Charitable contributions 11. Insurance (not deducted from wages or included in home mortgage payments) | 3 | |
| <u> </u> | a. Homeowner's or renter's | \$ | |
| 7 | b. Life | \$ | |
| 8 | c. Health | \$ | |
| 8 | d. Auto e. Other | \$ | 100.00 |
| 差 | e, Other | | |
| EZ-Filing, Inc. [1:400-998-2424] | 12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) | | |
| E G | | \$ | |
| 1993-2009 | Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in a. Auto | in the plan) \$\$ | ** 00 |
| 8 | | \$ | COOIDE |
| • | | \$ | |
| | 14. Alimony, maintenance, and support paid to others | \$, | |
| | 15. Payments for support of additional dependents not living at your home 16. Regular expenses from operation of business, profession, or farm (attach detailed statement | \$ and the modeland | |
| | 17. Other | | |
| | | <u>\$,</u> | |
| | 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Sche | | |
| | applicable, on the Statistical Summary of Certain Liabilities and Related Data. | \$5,2 | 255.00 |
| | 19. Describe any increase or decrease in expenditures anticipated to occur within the year follo | owing the filing of this document: | |
| | | | |
| | 20. STATEMENT OF MONTHLY NET INCOME | _ | |
| | a. Average monthly income from Line 15 of Schedule I | | 067.90 255.00 |
| | b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.) | | 255.00 87.10 |
| | c. recommy net meeting (a. minus o.) | | |
| | | | |

Bé Declaration (Official Form 6 - Declaration) (12/07)

Case No. 10-1050

Debtor(s)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

| DECL | ARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR |
|--|---|
| I declare under penalty of perjutrue and correct to the best of n | ry that I have read the foregoing summary and schedules, consisting of14 sheets, and that they are ty knowledge, information, and belief. |
| Date: March 11, 2010 | Signature: /a/ Mariliza Aurello Mariliza Aurello Debo |
| Date: | Signature: |
| | (John Dehicr, if any) [If joint case, both spouses must sign.] |
| DECLARATION AND | SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) |
| I declare under penalty of perjury compensation and have provided the and 342 (b); and, (3) if rules or gu | that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(b), idelines have been promulgated pursuant to 11 U.S.C. § 110(b) setting a maximum fee for services chargeable by the given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting |
| responsible person, or partner who | is not an individual, state the name, title (if any), address, and social security number of the officer, principal, signs the document. |
| | |
| Signature of Bankruptcy Petition Frepare | |
| Names and Social Security numbers is not an individual: | of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer |
| If more than one person prepared t | his document, attach additional signed sheets conforming to the appropriate Official Form for each person. |
| A bankruptcy petition preparer's fa imprisonment or both. 11 U.S.C. § | ilure to comply with the provision of title II and the Federal Rules of Bankruptcy Procedure may result in fines or 110 ; 18 U.S.C. § 156. |
| DECLARATION U | NDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP |
| | (the president or other officer or an authorized agent of the corporation or a |
| member or an authorized agent of (corporation or partnership) nan schedules, consisting of knowledge, information, and believed. | of the partnership) of the need as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and sheets (total shown on summary page plus 1), and that they are true and correct to the best of my lef. |
| Date: | Signature: |
| | (Print or type name of individual signing on benefit of debtor) |
| [An individual signing | on behalf of a partnership or corporation must indicate position or relationship to debtor? |

Penalty for making a faire statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

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Page 2

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

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B201B (Form 201B) (12/09)

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United States Bankruptcy Court Northern District of California

| IN RE: | | Case No. 10-10527 | |
|--|--|--|-------------|
| Aurello, Mariliza Debtor(s) | | | |
| | | | |
| CERTIFICATIO UNDER § | ON OF NOTICE TO CONSUMER 342(b) OF THE BANKRUPTCY | R DEBTOR(S) CODE | |
| Certificate of | [Non-Attorney] Bankruptcy Petitio | on Preparer | |
| I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy | signing the debtor's petition, hereby cer Code. | rtify that I delivered to the debtor the atta | ched |
| Printed Name and title, if any, of Bankruptcy Peti Address: | | Social Security number (If the bankrup petition preparer is not an individual, s the Social Security number of the offic principal, responsible person, or partne | tate er. |
| | | the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) | |
| X Signature of Bankruptcy Petition Preparer of office partner whose Social Security number is provided | er, principal, responsible person, or above. | (| |
| · | Certificate of the Debtor | | |
| I (We), the debtor(s), affirm that I (we) have recei | ved and read the attached notice, as requ | uired by § 342(b) of the Bankruptcy Code | ŧ. |
| Aurelio, Mariliza | X /s/ Mariliza Aureli | <u>40</u> 3/11/2 | 2010 |
| Printed Name(s) of Debtor(s) | Signature of Debto | | Date |
| Case No. (if known) | | | |
| | Signature of Joint | Debtor (if any) | Date |
| Instructions: Attack a conv. of Form D 2014. No. | | | |
| Instructions: Attach a copy of Form B 201A, Not | ace to Consumer Debtor(s) Under § 342 | (b) of the Bankruptcy Code. | |

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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| B22C (Official Form 22C) (Chapter 13) (01/08) In re: Auralio, Mariliza Case Number: /0 -/0527 | According to the calculations required by this statement: The applicable commitment period is 3 years. The applicable commitment period is 5 years. Disposable income is determined under § 1325(b)(3). |
|---|--|
| (If known) | Disposable income is not determined under § 1325(b)(3). (Check the boxes as directed in Lines 17 and 23 of this statement.) |

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| 1 | b. | rital/filing status. Check the box that applies an Unmarried. Complete only Column A ("Debt Married. Complete both Column A ("Debt | obtor's Income") for Lines 2-10. Or's Income") and Column B ("Spous | | | | |
|----------|---------|--|---|----|--------------------------------|----|--------------------------------|
| | the mor | figures must reflect average monthly income recessix calendar months prior to filing the bankruptcy of the before the filing. If the amount of monthly incited the six-month total by six, and enter the | eived from all sources, derived during y case, ending on the last day of the | | Column A Debtor's Income | _ | Column B Spouse's Income |
| 2 | Gro | ss wages, salary, tips, bonuses, overtime, com | missions. | \$ | 500.00 | s | 10,500.00 |
| 3 | one | ome from the operation of a business, profession of a business, profession of a properties column (a business, profession or farm, enter aggregate number. Do not enter a number less than zero. Do enses entered on Line b as a deduction in Part | s) of Line 3. If you operate more than nbers and provide details on an | | | | |
| | a. | Gross receipts | \$ | | | | |
| | b. | Ordinary and necessary operating expenses | \$ | | | | |
| . 1 | c. | Business income | Subtract Line b from Line a | \$ | | \$ | |
| 4 | unite | t and other real property income. Subtract Line rence in the appropriate column(s) of Line 4. Do nclude any part of the operating expenses entity. | not enter a number lass them The | - | | 4 | |
| ਤਾ ਹੈ | a. | Gross receipts | \$ | | | | |
| | ъ. | Ordinary and necessary operating expenses | \$ | | | | |
| 2, 24 | c. | Rent and other real property income | Subtract Line b from Line a | s | | Ф | |
| | | est, dividends, and royalties. | | \$ | | \$ | |
| 5 | Inter | | | Ψ | | Φ | |
| | | ion and retirement income. | | \$ | | \$ | |

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| | · | -/ | | | | | | | |
|------|---|--|---------------------------------------|--|------------------|---------|-------------|-------|--------------|
| 8 | Unemployment compensation. Enter However, if you contend that unemploy was a benefit under the Social Security Column A or B, but instead state the ar | yment compensation receive Act, do not list the amoun | ed by you | or vour spot | ıse | | | | |
| | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ | Spouse | \$ | | \$ | | \$ | |
| 9 | Income from all other sources. Specif sources on a separate page. Total and e maintenance payments paid by your or separate maintenance. Do not included or payments received as a victim of of international or domestic terrorism. [a] | nter on Line 9. Do not inc spouse, but include all ot ude any benefits received u | lude alim her paym inder the (| ony or separ tents of alime Social Securit | ate ony | | | | |
| • | b. | | | \$ | | | | | |
| | | | | | | \$ | | \$ | |
| 10 | Subtotal. Add Lines 2 thru 9 in Colum through 9 in Column B. Enter the total | (s). | | | | \$ | 500.00 | 5 5 | 10,500.00 |
| 11 | Total. If Column B has been completed and enter the total. If Column B has not Column A. | d, add Line 10, Column A to been completed, enter the | o Line 10 amount f |), Column B, rom Line 10, | | \$ | _ | | 11,000.00 |
| | Part II, CALCUL | ATTON OF § 1325(b)(4 |) COM | ALTMENT. | PER | IOD | | 建 | |
| 12 | Enter the amount from Line 11. | | | | | | | \$ | 11,000.00 |
| | Marital Adjustment. If you are marrie that calculation of the commitment peri your spouse, enter the amount of the inc basis for the household expenses of you | od under § 1325(b)(4) doe come listed in Line 10, Col | s not requ umn B th | iire inclusion at was NOT i | of the paid o | incor | ne of | | |
| 13 | a. | - | · · · · · · · · · · · · · · · · · · · | | \$ | | | | |
| | b. | | | | \$ | | | | |
| 4 46 | c. | | | | \$ | | | | |
| | Total and enter on Line 13. | | | | | | | \$ | 0.00 |
| 14 : | Subtract Line 13 from Line 12 and er | iter the result. | | | | | | \$ | 11,000.00 |
| 15 | Annualized current monthly income to 12 and enter the result. | for § 1325(b)(4). Multiply | the amou | int from Line | 14 by | the n | umber | \$ | 132,000.00 |
| 16 | Applicable median family income. En household size. (This information is avenue the bankruptcy court.) a. Enter debtor's state of residence: Cal | ilable by family size at <u>wy</u> | /w.usdoj. _. | gov/ust/ or fro | om the | e clerk | | | |
| | T there we | PROPERTY OF THE RESIDENCE OF THE PROPERTY OF THE RESIDENCE OF THE RESIDENCE OF THE PROPERTY OF | | r debtor's ho | useho | ld size | e! <u>6</u> | \$ | 86,377.00 |
| 17. | Application of § 1325(b)(4). Check the The amount on Line 15 is less that 3 years" at the top of page 1 of this | n the amount on Line 16. | Check th | e box for "Th | e app | licabl | e commi | tme | nt period is |
| | The amount on Line 15 is not less period is 5 years" at the top of page | than the amount on Line | 16. Chec | k the box for | "The | appli | cable cos | mmi | tment |
| | Part III. APPLICATION OF | § 1325(b)(3) FOR DE | ERMIN | ing disp | OŚA | BLE | INCON | Æ. | |
| 18 | Enter the amount from Line 11. | | **** | | | | - 17: 21: C | \$ | 11,000.00 |

| 19 | expe Colu than neces | ital adjustment. If you are more any income listed in Line I asses of the debtor or the debtor mn B income (such as payment the debtor or the debtor's deposary, list additional adjustment pply, enter zero. | or's dependents, Sont of the spouse's endents) and the spouse's | t was No pecify : tax liab amount | in the lines below the basis follows: of income devoted to each to | or the household or excluding the of persons other | | |
|-----------|---|--|---|---|---|--|-----------------|---------------|
| | a. | Paycheck deductions | | | | \$ 2,833.33 | | |
| | b. | | | | | \$ | | |
| | ¢. | | | | | \$ | | |
| | Tot | al and enter on Line 19. | | | | | s | 2,833.33 |
| 20 | Curr | ent monthly income for § 13 | 325(b)(3). Subtrac | t Line | 19 from Line 18 and enter th | e result. | \$ | B,166.67 |
| 21 . | Алп | zalized current monthly inco id enter the result. | | | | | | 98,000.04 |
| 22 | Appl | icable median family income | Enter the amoun | nt from | Line 16. | | \$ | 86,377.00 |
| 23 | The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable incondetermined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. | | | | | ment. | | |
| | T 🔲 T | he amount on Line 21 is not etermined under § 1325(b)(3) omplete Parts IV, V, or VI. | at the top of pag | e loft | on Line 22. Check the box this statement and complete | Part VII of this stat | ome i ement. | Do not |
| | d c | he amount on Line 21 is not etermined under § 1325(b)(3) omplete Parts IV, V, or VI. Part IV: CALCULA Subpart A: Deduc | TION OF DEL | e l of t ECT) | on Line 22. Check the box this statement and complete to the statement and complete to the statement and complete to the latertial Revenue Section 1. | Part VII of this stat ER \$ 707(b)(2) prijes (IRS) | ome in | not Do not |
| 1.4 | Nation misce Experthe clo | he amount on Line 21 is not etermined under § 1325(b)(3) complete Parts IV, V, or VI. Part IV: CALCULA Subpart A: Deduction of the bankruptcy court.) | TION OF DEI | OUCT DUCT DUCT DUCT DUCT DUCT DUCT DUCT D | on Line 22. Check the box this statement and complete this statement and complete this statement and complete this statement and complete this statement and the laternal Revenue Seeping supplies, personal called the laternal Standards for an is available at www.usdoj | ER § 707(b)(2) Price (IRS) re, and Allowable Living gov/ust/ or from | ome in | not Do not |
| 1A | Natio misce Experthe cle Natio Out-or www. your h housel the nu memb | he amount on Line 21 is not etermined under § 1325(b)(3) complete Parts IV, V, or VI. Part IV: CALCULA Subpart A: Deduce the parts of | TION OF DEI tions under State and services, he he "Total" amount old size. (This infi- cons under 65 years ons 65 years of ag he of the bankrupt ears of age, and er cor older. (The total tiply Line al by I sult in Line c1. Mind enter the result | DUCT: udards ouseker t from I ormatio below the sof age ge or old cy cour nter in I d numb Line bi ultiply | on Line 22. Check the box this statement and complete this statement. Herefore, and in Line a2 the IRS National standards for a complete this information is available at www.usdoj the amount from IRS National cand in Line a2 the number of members of the complete the number of members of the complete | ER § 707(b)(2) re, and Allowable Living gov/ust/ or from 1 Standards for ional Standards for idable at ber of members of ers of your ust be the same as household a total amount for | sment. | Do not |
| 1 | Natio misce Experthe clo Out-or www. your h housel the nu memb housel health | Furt IV: CALCULA Subpart A: Deduction of the bankruptcy court.) and Standards: food, appare llaneous. Enter in Line 24A the bankruptcy court.) and Standards: health care. If Pocket Health Care for personated the bankruptcy court.) and Standards: health care. If Pocket Health Care for personated in Line 16b.) Mullers under 65 years of age (mber stated in Line 16b.) Mullers under 65, and enter the responded members 65 and older, and o | TION OF DEI TION | OUCT OUSE READ OUSE READ OUSE READ OF THE PROPERTY OF THE PROP | on Line 22. Check the box this statement and complete the lateral Revenue Seeping supplies, personal call IRS National Standards for April 19 and in Line at the IRS National and in Line at the IRS National and in Line at the IRS National Carlo IRS Information is available to the number of members of household members must be obtain a total amount for Line at by Line be to obtain a cet. Add Lines cl and cet. | ER § 707(b)(2) re, and Allowable Living gov/ust/ or from Standards for ional Standards for ilable at ber of members of ers of your ust be the same as household a total amount for obtain a total | sment. | Do not |
| 1 | Natio misce Experthe clo Out-or www. your h housel the nu memb housel health | Part IV: CALCULA Subpart A: Deduce the amount on Line 21 is not etermined under § 1325(b)(3) complete Parts IV, V, or VI. Part IV: CALCULA Subpart A: Deduce the applicable household who are so for the applicable household who are under 65 years of age (applicable who are so for the applicable household who are under 65 years of age (applicable who are 65 years of age (applicable who are 65, and enter the rest hold members 65 and older, an care amount, and enter the rest | TION OF DEI TION | OUCT OUSE READ OUSE READ OUSE READ OF THE PROPERTY OF THE PROP | on Line 22. Check the box this statement and complete the later and the later and later and in Line at the IRS National cand in Line at the number of members of household members must be obtain a total amount for Line at by Line be to obtain a cand cand cand cand cand cand cand c | ER \$ 707(b)(2) re, and Allowable Living gov/ust/ or from I Standards for ional Standards for ional Standards for ilable at ber of members of ers of your ust be the same as household a total amount for obtain a total f age or older | sment. | Do not |
| | Natio misce Experthe cle Out-or www. your h house the nu memb housel health | Fart IV: CALCULA Subpart A: Deduce the amount on Line 21 is not etermined under § 1325(b)(3) complete Parts IV, V, or VI. Fart IV: CALCULA Subpart A: Deduce the applicable household who are for personal Standards: health care. If Pocket Health Care for personal Standards: health | TION OF DEL TION OF DEL ctions under Star and services, he he "Total" amoun old size. (This info Enter in Line al bons under 65 years ons 65 years of ag k of the bankrupt ears of age, and er or older. (The tota tiply Line al by I sult in Line c1. M and enter the result sult in Line 24B. | DUCTION IN THE PROPERTY OF THE | on Line 22. Check the box this statement and complete the lateral Revenue Seeping supplies, personal call IRS National Standards for April 19 and in Line at the IRS National and in Line at the IRS National and in Line at the IRS National Carlo IRS Information is available to the number of members of household members must be obtain a total amount for Line at by Line be to obtain a cet. Add Lines cl and cet. | ER \$ 707(b)(2) re, and Allowable Living gov/ust/ or from I Standards for ional Standards for ilable at ber of members of ers of your ust be the same as household a total amount for obtain a total f age or older 144.00 | sment. | Do not |
| | Natio misce Experthe clo Out-or www. your h housel health | Part IV: CALCULA Subpart A: Deduce the amount of the land and a subpart A: Deduce the land and a s | TION OF DEI TION OF DEI TION OF DEI Tions under Star I and services, he he "Total" amoun old size. (This info Enter in Line al b ons under 65 years of age, and er ears of age, and er tiply Line al by I sult in Line c1. M and enter the result sult in Line 24B. ears of age 60.00 | OUCTA OUSE REPORT TO THE PROPERTY OF THE PROP | on Line 22. Check the box this statement and complete the lateral Revenue Seeping supplies, personal call RS National Standards for A this available at www.usdoj the amount from IRS Nationals, and in Line a2 the IRS Nationals, and in Line a1 the Iron the number of household members must be obtain a total amount for Line a2 by Line b2 to obtain a c2. Add Lines c1 and c2 to sehold members 65 years of Allowance per member | ER \$ 707(b)(2) re, and Allowable Living gov/ust/ or from I Standards for ional Standards for ional Standards for ilable at ber of members of ers of your ust be the same as household a total amount for obtain a total f age or older | sment. | Do not |

26

25B

Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.

| a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ 1,740.00 |
|----|--|-----------------------------|
| b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 | \$ |
| c. | Net mortgage/rental expense | Subtract Line b from Line a |

1,740.00

Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: The mortgage payment on the home is \$3900 a month.

2,160,00

Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.

Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.

27A □ 0 □ 1 ▼ 2 or more.

> If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.)

522,00

Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)

Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)

Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.

| a. | IRS Transportation Standards, Ownership Costs | \$ 489.0 | .00 |
|----|--|-----------------------------|-----|
| ь. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 | \$ 198. | .12 |
| C. | Net ownership/lease expense for Vehlcle 1 | Subtract Line b from Line a | |

290.88

27B

| BZZC | | ai Form 22C) (Chapter 13) (01/08) | | | |
|-----------|----------------------------|--|--|--------------|-------------|
| | Loca | al Standards: transportation ownership/lease expense; Vehicle 2. ked the "2 or more" Box in Line 28. | Complete this Line only if you | | |
| 29 | the t | er, in Line a below, the "Ownership Costs" for "One Car" from the IR asportation (available at www.usdoj.gov/ust/ or from the clerk of the botal of the Average Monthly Payments for any debts secured by Vehicact Line b from Line a and enter the result in Line 29. Do not enter a | ankruptcy court); enter in Line b | | |
| | a. | IRS Transportation Standards, Ownership Costs | \$ 489.00 | 1 | |
| | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 | \$ 122.95 | | |
| · . | c. | Net ownership/lease expense for Vehicle 2. | Subtract Line b from Line a | 1 \$ | 366.05 |
| 30 | I rener | er Necessary Expenses: taxes. Enter the total average monthly expensal, state, and local taxes, other than real estate and sales taxes, such a special-security taxes, and Medicare taxes. Do not include real estate | I theema towar colf amenias were | +- | 32.10 |
| 31 | and u | er Necessary Expenses: involuntary deductions for employment. Ections that are required for your employment, such as mandatory retiriniform costs. Do not include discretionary amounts, such as voluntaries. | ement contributions, union dues, stary 401(k) contributions. | ╈ | |
| 32 | Othe for te whol | r Necessary Expenses: life insurance. Enter total average monthly permitted insurance for yourself. Do not include premiums for insurance life or for any other form of insurance. | remiums that you actually pay ace on your dependents, for | \$ | |
| 33 | I Equi | r Necessary Expenses: court-ordered payments. Enter the total mored to pay pursuant to the order of a court or administrative agency, sents. Do not include payments on past due obligations included in | uch as spoused on shild a | \$ | |
| 34 | Other child. | r Necessary Expenses: education for employment or for a physical. Enter the total average monthly amount that you actually expend for byment and for education that is required for a physically or mentally a no public education providing similar services is available. | illy or mentally challenged | s | |
| 35 | Other | r Necessary Expenses: childcare. Enter the total average monthly ar ildcare — such as baby-sitting, day care, nursery and preschool. Do no | nount that you actually expend t include other educational | \$ | |
| 36 | reimb | r Necessary Expenses: health care. Enter the total average monthly id on health care that is required for the health and welfare of yourself ursed by insurance or paid by a health savings account, and that is in 24B. Do not include payments for health insurance or health savings. | or your dependents, that is not | \$ | |
| 37 | Other you ac service | Necessary Expenses: telecommunication services. Enter the total a ctually pay for telecommunication services other than your basic home—such as pagers, call waiting, caller id, special long distance, or into sary for your health and welfare or that of your dependents. Do not in | e telephone and cell phone | \$ | |
| 38 | Total | Expenses Allowed under IRS Standards. Enter the total of Lines 2 | 4 through 37. | \$ | 7,707.03 |
| | | | | Ψ | 7,107.03 |

| | | Support B: Add Note: Do not include | ditional Expense Deductions under § 707(b) le any expenses that you have listed in Lines 24-37 | | i P |
|----------|----------------------------|---|--|------------|----------------|
| | Leybe | Ith Insurance, Disability Insurance, a nses in the categories set out in lines acse, or your dependents. | nd Health Savings Account Expenses. List the monthly c below that are reasonably necessary for yourself, your | | • |
| | a. | Health Insurance | \$ | | |
| | b. | Disability Insurance | \$ | | |
| 39 | c. | Health Savings Account | \$ | | |
| | Total | and enter on Line 39 | | \$ | |
| | If yo the s | u do not actually expend this total an pace below: | nount, state your actual total average monthly expenditures in | | |
| <u> </u> | \$ | | | | |
| 40 | elder. | in a expenses must boil will coulding to a | usehold or family members. Enter the total average actual any for the reasonable and necessary care and support of an of your household or member of your immediate family who is lude payments listed in Line 34. | \$ | 10 KW 11 12 27 |
| 41 | Servi | ctually incur to maintain the safety of ve | the total average reasonably necessary monthly expenses that our family under the Family Violence Prevention and The nature of these expenses is required to be kept | s | |
| 42 | provi | Sundards for Housing and Utilities, th | monthly amount, in excess of the allowance specified by IRS at you actually expend for home energy costs. You must tion of your actual expenses, and you must demonstrate onable and necessary. | \$ | |
| 43 | second truste | ay incur, not to exceed \$137.50 per child dary school by your dependent children with documentation of your actual | n under 18. Enter the total average monthly expenses that you id, for attendance at a private or public elementary or less than 18 years of age. You must provide your case expenses, and you must explain why the amount claimed by accounted for in the IRS Standards. | \$ | |
| 44 | Addit clothin Nation | ional food and clothing expense. Enteng expenses exceed the combined allowed all Standards, not to exceed 5% of those | or the total average monthly amount by which your food and vances for food and clothing (apparel and services) in the IRS e combined allowances. (This information is available at pankruptcy court.) You must demonstrate that the | | 59.35 |
| | Chari charita | table contributions. Enter the amount | reasonably necessary for you to expend each month on | <u>Ψ</u> | |
| 15 | in 26 l incom | 0.3.C. 8 1/0(c)(1)-(2). Do not include | any amount in excess of 15% of your gross monthly | ` . | |

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| Name of Creditor | you Pay the follo | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47. | | | | | | | · |
|---|----------------------------|---|---|---------------|--------------|-------------------------|--------------|------|---|
| b. Western Healthcare Fcu Automobile (2) \$ 122.95 yes no c. S yes no Total: Add lines a, b and c. Other payments on secured claims. If any of dotts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be peld in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount | | Name of Creditor | Property Securing the Debt | [M | lonthly | include | taxes or | | |
| Cher payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Property Securing the Debt 1/60th of the Cure Amount a. S. Total: Add lines a, b and c. \$ Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses, Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expenses. Projected average monthly Chapter 13 plan payment. S. 79.22 b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b S. Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | a. | Western Healthcare Fou | Automobile (1) | \$ | 198.12 | ☐ yes | ⊠ no | | |
| Total: Add lines a, b and c. Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. 5 Total: Add lines a, b and c. Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expenses. Projected average monthly Chapter 13 plan payment. 5 Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.uscloj.gov/usc/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b S Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | Ъ. | Western Healthcare Fou | Automobile (2) | \$ | 122.95 | ☐ yes | ▼ no | | |
| Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor | C. | | | \$ | | ☐ yes | no | | |
| Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor | | | Total: Ac | id lines a, b | and c. | | | \$ | 3 |
| a. | fore | foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries of separate page. | | | | | tries on a | | |
| b. | | Name of Creditor | Property Securing | the Debt | | + | Amount | | |
| C. STOTAL: Add lines a, b and c. S Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses, Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. \$ 78.22 b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b S. Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | 1 | | | | . <u> </u> | | | | |
| Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | 1 一 | | | | | | | ļ | |
| Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b \$ Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | - | | | ~ | Control A di | <u> </u> | 1 | | |
| such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b \$ Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | <u> -</u> | | | | | | | \$ | |
| the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b S Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | such | t as priority tax, child support an | id alimony claims, for which you | ı were liable | at the tir | ne of vo | laims, ur | \$ | |
| b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 Total: Multiply Lines a and b \$ Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ 3 | Cha the r | pter 13 administrative expensersulting administrative expense | es, Multiply the amount in Line | a by the am | ount in Li | ne b, an | d enter | | |
| schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) C. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b \$ Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ 3: | 8. | Projected average monthly Cl | napter 13 plan payment. | \$ | | 79.22 | | | |
| case and b \$ Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ 3: | b. | schedules issued by the Execu Trustees. (This information is www.usdoj.gov/ust/ or from t | ative Office for United States available at | x | \$ | 9.8% | | | |
| Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. | C. | | ve expense of Chapter 13 | | tiply Line | s a | | | |
| | | | | | | | | ļ. — | |
| | Tota | Deductions for Dahr Payment | Inter the total of Lines 47 through | ነ ናለ | | | | | |
| Total of all deductions from income. Enter the total of Lines 38, 46, and 51. | | | Enter the total of Lines 47 through Subpart D: Fotal Deductions for Enter the total of Lines 38, 44 | roni Incon | ABIN INC. | en (sind) ye en by a | | \$ | |

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| | <u> </u> | r V. DETERMINATION OF DISPOSABLE IN | Saute Line 4 10 cm/h/c | | Alexander (1995) Maria (1995) |
|------------|---|--|--|---|----------------------------------|
| 5 3 | | monthly income. Enter the amount from Line 20. | | \$ | 8,166.67 |
| 54 | disability payme | se. Enter the monthly average of any child support payme ents for a dependent child, reported in Part I, that you reconstructed law, to the extent reasonably necessary to be expended. | ceived in accordance with | s | |
| 55 | from wages as c | ement deductions. Enter the monthly total of (a) all amocontributions for qualified retirement plans, as specified in oans from retirement plans, as specified in § 362(b)(19). | in § 541(b)(7) and (b) all required | i s | |
| 56 | Total of all ded | ductions allowed under § 707(b)(2). Enter the amount f | rom Line 52. | \$ | 8,095.21 |
| | for which there in lines a-c below total in Line 57. | special circumstances. If there are special circumstances is no reasonable alternative, describe the special circums ow. If necessary, list additional entries on a separate page. You must provide your case trustee with documentation ed explanation of the special circumstances that make su | stances and the resulting expenses. Total the expenses and onter the of these expenses and you must | | |
| 57 | Nature of | f special circumstances | Amount of expense | 1.1 | |
| 20 | a. | | S | | |
| | b. | | S | | |
| | c. | | s | _ | |
| | | | Total: Add Lines a, b, and c | : s | |
| 58 | Total adjustme enter the result. | ents to determine disposable income. Add the amounts | on Lines 54, 55, 56, and 57 and | \$ | 8,095.21 |
| 59 | | sable Income Under § 1325(b)(2). Subtract Line 58 fro | om Line 53 and enter the result | \$ | 71.46 |
| | | | | | |
| | | Part VI. ADDITIONAL EXPENS | ečlajms : | | |
| | Other Expenses and welfare of you income under § 7 | | E CLAIMS stated in this form, that are required ditional deduction from your curr | ed for the | health |
| | Other Expenses and welfare of you income under § 7 average monthly | Part VI. ADDITIONAL EXPENSION AND ADDITIONAL EXPENSION And describe any monthly expenses, not otherwise ou and your family and that you contend should be an addroved (ii)(I). If necessary, list additional sources of | E CLAIMS stated in this form, that are required ditional deduction from your curr | ed for the ent montl uld reflec | health |
| | Other Expenses and welfare of you income under § 7 average monthly | Part VI. ADDITIONAL EXPENS. List and describe any monthly expenses, not otherwise ou and your family and that you contend should be an add 707(b)(2)(A)(ii)(I). If necessary, list additional sources of expense for each Item. Total the expenses. | stated in this form, that are required ditional deduction from your current a separate page. All figures sho Monthly | ed for the ent montl uld reflec | health |
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| ii. | Other Expenses and welfare of you income under § 7 average monthly Expense D a. b. c. | Part VI. ADDITIONAL EXPENS s. List and describe any monthly expenses, not otherwise ou and your family and that you contend should be an ad- 707(b)(2)(A)(ii)(I). If necessary, list additional sources of expense for each Item. Total the expenses. Description Total: A Part VII. VERIFICATIO menalty of perjury that the information provided in this states at stan. | stated in this form, that are required in this form, that are required as exparate page. All figures shown a separate page. All figures shown that it is a separate page. All figures shown is a separate page. Separate page. All figures shown is a separate page. | red for the ent month uld reflect Amount | health aly t your |
| 0.00 | Other Expenses and welfare of your income under § 7 average monthly Expense D a. b. c. I declare under proboth debtors mus | Part VI. ADDITIONAL EXPENS. List and describe any monthly expenses, not otherwise ou and your family and that you contend should be an add 707(b)(2)(A)(ii)(I). If necessary, list additional sources of expense for each Item. Total the expenses. Description Total: A Part VII. VERIFICATIO Denalty of perjury that the information provided in this start stan.) Signature: (b) Martiiza Aurelio | stated in this form, that are required ditional deduction from your current a separate page. All figures sho Monthly \$ \$ \$ Add Lines a, b and c \$ | red for the ent month uld reflect Amount | health aly t your |

B6 Summary (Form 6 - Summary) (12/07)

United States Bankruptcy Court Northern District of California

| IN RE: | Case No. 10 - 10507 |
|------------------|---------------------|
| Aureilo Marillae | Chantan sa |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and I in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|--|--|--|
| A - Real Property | Yes | 1 | \$ 0.00 | Participants of the state of th | |
| B - Personal Property | Yea | 3 | \$ 28,199.00 | | Angles (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1 | \$ 19,264.00 | ments of the first has been blanked. |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | You | 1 | | \$ 332,269.00 | |
| G - Executory Contracts and Unexpired Leases | Yea | 1 | | And the second s | Company of the Compan |
| H - Codebtors | Yes | 1 | The state of the s | | |
| - Current Income of Individual Debtor(s) | Yes | 1 | | | \$ 5,067.9 |
| - Current Expenditures of Individual Debtor(s) | Yes | 1 | A CONTROL OF THE CONTROL OF T | The state of the s | \$ 5,255.00 |
| | TOTAL | Į. | \$ 28,199.00 | " | |

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United States Bankruptcy Court Northern District of California

| IN RE: | | Case No. 10 + 1050-7 |
|-------------------|-----------|----------------------|
| Aurelio, Mariliza | | Case No. 10 - 1050-7 |
| | Debtor(s) | Chapter 13 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them-

| Type of Liability | T | Amount |
|---|----------|--------|
| Domestic Support Obligations (from Schedule E) | | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ | 0.00 |
| Student Loan Obligations (from Schedule F) | 4 | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ | 0.00 |
| TOTAL | \$ | 0.00 |

State the following:

| Anamara I | | |
|--|-----------|----------|
| Average Income (from Schedule I, Line 16) | \$ | 5,067.90 |
| Average Expenses (from Schedule J, Line 18) | \$ | 5,255.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 1. | |
| | \$ | 6,166.67 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 0,00 |
|--|--|---------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | Suprama Theory | \$ 332,269,00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | gadar (g. 1974) and an | \$ 332,268.00 |

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